The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are competent, with the one chosen by the applicant. The full name or two-letter code of that Authority may be indicated by the applicant on the line below:

IPEA JP

## PCT

## DEMAND

under Article 31 of the Patent Cooperation Treaty:

The undersigned requests that the international application specified below be the subject international preliminary examination according to the Patent Cooperation Treaty.

CHAPTER II
PC |
22.9, 05
e subject | 突頓印

PCT/JP2004/017331  Title of invention LUMINESCENT DEVICE  Box No. II APPLICANT(S)  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)  CANON KABUSHIKI KAISHA  3-30-2; Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan  Telephone No. 03-3758-2111  Facsimile No. 03-3756-0947  Teleprinter No.	For	r International Preliminar	y Examining Authori	ty use only			
International application No. PCT/JP2004/017331 International filing date (day/month/year) (Earliest) Priority date (day/month/year) 16/11/2004 (International application No. PCT/JP2004/017331 (International filing date (day/month/year) 16/11/2003 (Iterational policies) Priority date (day/month/year) 01/12/2003  Title of invention LUMINESCENT DEVICE  Box No. II APPLICANT(S)  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country)  CANON KABUSHIKI KAISHA  3-30-2, Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan  State (that is, country) of nationality: JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  State (that is, country) of nationality: JAPAN  State (that is, country) of nationality: State (that is, country) of residence: JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN	Identification of IPEA		Date of receipt of I	Date of receipt of DEMAND			
Title of invention LUMINESCENT DEVICE  Box No. II APPLICANT(S)  Name and address: (Finally name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country)  CANON KABUSHIKI KAISHA 3-30-2; Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan  State (that is, country) of nationality: JAPAN  Name and address: (Finally name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country)  State (that is, country) of residence: JAPAN  Name and address: (Finally name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of the country) of residence: JAPAN  State (that is, country) of nationality: JAPAN  State (that is, country) of nationality: JAPAN  Name and address: (Finally name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of the country) of residence: JAPAN  Name and address: (Finally name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of the country) of residence: JAPAN  Name and address: (Finally name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country) of residence: JAPAN  Name and address: (Finally name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of the country) of residence: JAPAN  Anally Salary Sa	Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION						
LUMINESCENT DEVICE  Box No. II APPLICANT(S)  Name and address: (Family name followed by given name; for a legal entity, full official designation. Telephone No. 3-3758-2111  CANON KABUSHIKI KAISHA  3-30-2, Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan  State (that is, country) of nationality:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of residence:  JAPAN  State (that is, country) of nationality:  State (that is, country) of residence:  JAPAN  State (that is, country) of nationality:  State (that is, country) of residence:  JAPAN  State (that is, country) of nationality:  JAPAN  State (that is, country) of residence:  JAPAN  State (that is, country) of nationality:  JAPAN  State (that is, country) of residence:  JAPAN  State (that is, country) of residence:  JAPAN  Anne and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country) appears the state of the s				(Earliest) Priority date (day/month/year) 01/12/2003			
Name and address: (Family name followed by given name; for a legal entity, full official designation.  CANON KABUSHIKI KAISHA  3-30-2; Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan  State (that is, country) of nationality:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of residence:  JAPAN  State (that is, country) of postal code and name of country of the address must include postal code and name of country of the address must include postal code and name of country of residence:  JAPAN  State (that is, country) of residence:  JAPAN  State (that is, country) of residence:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of residence:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of country of residence:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of country of residence:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of residence:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country of residence:  JAPAN							
CANON KABUSHIKI KAISHA  3-30-2, Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan  State (that is, country) of nationality: JAPAN  State (that is, country) of nationality: JAPAN  State (that is, country) of nationality: JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country (that is, country) of residence:  State (that is, country) of nationality: JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  C/O CANON KABUSHIKI KAISHA  3-30-2, Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan	Box No. II APPLICANT(S)						
3-30-2, Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan  Teleprinter No.  Applicant's registration No. with the Off  State (that is, country) of nationality:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country CANON KABUSHIKI KAISHA 3-30-2, Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan  State (that is, country) of nationality:  JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country KAMATANI, Jun  C/o CANON KABUSHIKI KAISHA 3-30-2, Shirmomaruko, Ohta-ku, Tokyo 146-8501 Japan		_	full official designation.	03-3758-2111 Facsimile No.			
State (that is, country) of nationality:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of count TSUBOYAMA, Akira  c/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan.  State (that is, country) of nationality:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of count KAMATANI, Jun  c/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan	3-30-2, Shimomaruko, Ohta-	ku, Tokyo 146-85	501 Japan				
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of count TSUBOYAMA, Akira  c/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan  State (that is, country) of nationality:  JAPAN  State (that is, country) of residence:  JAPAN  Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of count KAMATANI, Jun  c/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan			•	Applicant's registration No. with the Office			
C/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan  State (that is, country) of nationality:  JAPAN  State (that is, country) of residence:  JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of count KAMATANI, Jun  C/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan				(17) of residence:			
JAPAN  Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of count KAMATANI, Jun  c/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan	TSUBOYAMA, Akira c/o CANON KABUSHIKI KAI	ISHA		, , , , , , , , , , , , , , , , , , ,			
KAMATANI, Jun c/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan				יניט) of residence:			
c/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan	Name and address: (Family name followed by gi	iven name; for a legal entity, fi	d official designation. The	e address must include postal code and name of country.)			
3-30-2, Shimomaruko, Ohta-ku, Tokyo 146-8501 Japan	KAMATANI, Jun						
State (that is, country) of nationality:  State (that is, country) of residence:			601 Japan				
State (that is, country) of nationality:  State (that is, country) of residence:	•	· ·					
JAPAN JAPAN				of residence:			
Further applicants are indicated on a continuation sheet.	Further applicants are indicated on a	continuation sheet.					

Sheet No. .2

International application No. PCT/JP2004/017331

	1 0 1/01 200 1/1 001
Continuation of Box No. II APPLICANT(S)	
If none of the following sub-boxes is used, this sheet should not be it	nchuled in the demand
Name and address: (Family name followed by given name; for a legal of	entity, full official designation: The address must include postal code and name of country.)
FURUGORI, Manabu	
C/O CANON KABUSHIKI KAISHA	
3-30-2, Shimomaruko, Ohta-ku, Tokyo 14	6-8501 Japan
State (that is, country) of nationality:	State (that is, country) of residence:
JAPAN	JAPAN
Name and address: (T	
	ntity, full official designation. The address must include postal code and name of country.)
OKADA, Shinjiro	
c/o CANON KABUSHIKI KAISHA	
3-30-2, Shimomaruko, Ohta-ku, Tokyo 14	0.0004
3-30-2, Shimomaruko, Onta-ku, Tokyo 14	0-8501 Japan
• • •	
State (that is, country) of nationality:	Sur. 63
JAPAN	State (that is, country) of residence:  JAPAN
	ity, full official designation. The address must include postal code and name of country.)
TAKIGUCHI, Takao	
O/O CANONI KARLIGUIKI KANOLIA	
c/o CANON KABUSHIKI KAISHA	C 0504 1
3-30-2, Shimomaruko, Ohta-ku, Tokyo 146	o-8501 Japan
State (that is, country) of nationality:	State (that is, country) of residence:
JAPAN	JAPAN
Name and address: (Family name followed by given name: for a level entit	ty, full official designation. The address must include postal code and name of country.)
, , , , , , , , , , , , , , , , , , , ,	, and a supplement the courtes must instance postal code and name of country.)
;	
State (that is, country) of nationality:	State (that is, country) of residence:
	<u> </u>
Further applicants are indicated on another continuation s	sheet.
•	•

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Sheet	Nο	J

International application No. PCT/JP2004/017331

Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE					
The following person is agent common representative	: .				
and k has been appointed earlier and represents the applicant(s) also for international pr	eliminary examination.				
is hereby appointed and any earlier appointment of (an) agent(s)/common represe	ntative is hereby revoked.				
is hereby appointed, specifically for the procedure before the International Prelim the agent(s)/common representative appointed earlier.	inary Examining Authority, in addition to				
Name and address: (Family name followed by given name: for a legal entity, full official designation.  The address must include postal code and name of country.)	Telephone No. 03-3213-1561				
	Facsimile No.				
Patent Attorney TAKANASHI, Norimichi	03-3214-0929				
No 602 Euli Plda 2.2 Marunayahi 2 shama	Teleprinter No.				
No. 602, Fuji Bldg., 2-3, Marunouchi 3-chome, Chiyoda-ku, Tokyo 100-0005 Japan					
Omyoud-Ru, Tokyo 100-0000 Japan	Agent's registration No. with the Office				
Address for correspondence: Mark this check-box where no agent or common i	representative is/has been appointed and the				
space above is used instead to indicate a special address to which correspondence	should be sent.				
Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION					
Statement concerning amendments:*					
1. The applicant wishes the international preliminary examination to start on the basis of	<b>6</b>				
the international application as originally filed	·				
the description as originally filed					
as amended under Article 34					
the claims as originally filed	•				
as amended under Article 19 (together with any accompanying	ig statement)				
as amended under Article 34					
the drawings as originally filed					
as amended under Article 34					
The applicant wishes any amendment to the claims under Article 19 to be considered as reversed.					
3. The applicant wishes the start of the international preliminary examination to applicable time limit under Rule 69.1(d).					
4. The applicant expressly wishes the international preliminary examination to a applicable time limit under Rule 54bis.1(a).	start earlier than at the expiration of the				
applicable tille illilli tillier Kule 34015.1(8).					
* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.					
Language for the purposes of international preliminary examination: English					
which is the language in which the international application was filed.					
which is the language of a translation furnished for the purposes of international search.					
which is the language of publication of the international application.					
which is the language of the translation (to be) furnished for the purposes of international preliminary examination.					
Box No. V ELECTION OF STATES					
The filing of this demand constitutes the election of all Contracting States which are designated and are bound by Chapter II of the PCT.					
	· · · · · ·				

Sheet No. .4

International application No. PCT/JP2004/017331

<u> </u>				F C 1/31 200-	4/01/001		
Box No. VI CHECK LIST							
The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:				For International Preliminary Examining Authority use only received not received			
translation of international application	:		sheets	. 🗀			
2. amendments under Article 34	:		sheets				
copy (or, where required, translation) of amendments under Article 19	. :		sheets				
copy (or, where required, translation) of statement under Article 19	; <b>:</b> .	•	sheets				
5. letter	:		sheets				
6. other (specify)	:		sheets.		<u> </u>		
The demand is also accompanied by the item(s)	marked below:						
1. K fee calculation sheet		5. 🔲	statement expla	ining lack of signat	ure		
2. original separate power of attorney	•	6.	sequence listing	in computer readal	ole form		
3. original general power of attorney		7. 🖸		ter readable form re	lated to a		
4. copy of general power of attorney; reference number, if any:		sequence listing  8. other (specify): Revenue stamps, Receipt of fees					
	ACENT OR			naid to denosit a	account of WIPO		
Box No. VII SIGNATURE OF APPLICANT,  Next to each signature, indicate the name of the person sign					s from reading the demand).		
		·.	, , , , , , , , , , , , , , , , , , , ,				
		體高腦					
TAKANASHI, Norimichi 室蘭書							
		<del>,</del>			٠.		
		:		•	• •		
For Internal	ional Prelimina	ry Examinia	g Authority use	only			
For International Preliminary Examining Authority use only  1. Date of actual receipt of DEMAND:							
2. Adjusted date of receipt of demand due			<del></del>	-			
to CORRECTIONS under Rule 60.1(b):		· •	• •				
The date of receipt of the demand is expiration of 19 months from the price item 4 or 5, below, does not apply.		6.	expiration of		and is AFTER the Rule 54 <i>bis</i> :1(a) and ly.		
The applicant has been informed	d accordingly.	7.			is WITHIN the time		
4. The date of receipt of the demand is WII limit of 19 months from the priority dat		Rule 80.5.		Rule 54bis.1(a) as extended by virtue of  ; ne date of receipt of the demand is after the			
by virtue of Rule 80.5.  Although the date of receipt of the dema expiration of 19 months from the prid delay in arrival is EXCUSED pursuant	ority date, the	8.	D expiration of	date of receipt of the first under the time limit under wal is EXCUSED party.	r Rule 54 <i>bis</i> . 1(a), the		
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Demand received from IPEA on:							